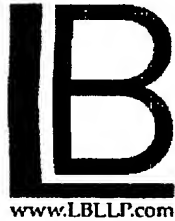


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Fax:	(571) 273-8300	Pages:	4 (including cover page)
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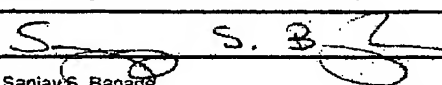
Comments: **OFFICIAL FILING****Application No.:** 10/615,491**Filing Date:** July 7, 2003**Title:** EXTRAPLEURAL AIRWAY DEVICE AND METHOD**Inventor(s):** Bryan LOOMAS et al.**Examiner:** Peter J. Vrettakos**Group Art Unit:** 3739**Attorney Docket No.:** BRONNE00600

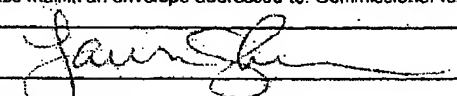
Papers attached:

1. Transmittal (1 page)
2. Response to Restriction Requirement (2 pages)

PTO/SB/21 (09-04)
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/915,491
	Filing Date	July 7, 2003
	First Named Inventor	Bryan LOOMAS
	Art Unit	3739
	Examiner Name	Peter J. Vrettakos
	Attorney Docket Number	BRONNE00600
Total Number of Pages in This Submission		4

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Fax Cover Sheet (1 page)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Levine Bagade LLP (Customer No. 40518)	
Signature		
Printed name	Sanjay G. Bagade	
Date	August 5, 2005	Reg. No. 42,280

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Date	August 5, 2005

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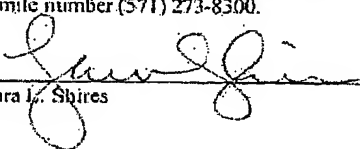
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PATENT
Attorney Docket No.: BRONNE00600

By 
Laura L. Shires

Appl. No. : 10/615,491
Applicant : Bryan LOOMAS et al.
Filed : July 7, 2003
A.U. : 3739
Examiner : Peter J. Vrettakos
Docket No. : BRONNE00600
Customer No. : 40518

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RESPONSE TO RESTRICTION REQUIREMENT

Sir:

This is in response to the Second Restriction Requirement mailed July 6, 2005.

Response to Restriction Requirement begins on page 2 of this paper.